

# Express Mail Mailing Label No. EV 951020202 US

PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031  
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/644,582
Filing Date	August 20, 2003
First Named Inventor	Navin D. Chandra
Art Unit	2166
Examiner Name	Pham, Khanh B.
Attorney Docket Number	GEN-001

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached (2 checks) <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> 8 <sup>th</sup> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> <li>• Request for Continued Examination Transmittal</li> <li>• Form PTO SB/08</li> <li>• Copies of references cited (C24-C25)</li> <li>• Return Receipt Postcard</li> </ul>
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	GOODWIN PROCTER LLP		
Signature			
Printed name	Joel E. Lehrer		
Date	February 28, 2007	Reg. No.	56,401



# Express Mail Mailing Label No. EV 951020202 US

PTO/SB/17 (07-06)

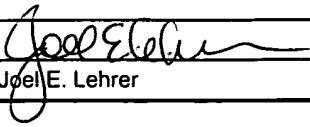
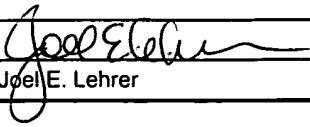
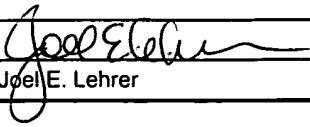
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<p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <p><b>FEE TRANSMITTAL</b> <b>For FY 2007</b></p>		<p><b>Complete if Known</b></p> <table border="1"> <tr> <td>Application Number</td> <td>10/644,582</td> </tr> <tr> <td>Filing Date</td> <td>August 20, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Chandra</td> </tr> <tr> <td>Examiner Name</td> <td>Phan, Khanh B.</td> </tr> <tr> <td>Art Unit</td> <td>2166</td> </tr> </table>		Application Number	10/644,582	Filing Date	August 20, 2003	First Named Inventor	Chandra	Examiner Name	Phan, Khanh B.	Art Unit	2166
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<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27													
<b>TOTAL AMOUNT OF PAYMENT</b> <b>(\$)</b> <b>635.00</b>		Attorney Docket No. <b>GEN-001</b>											

<p><b>METHOD OF PAYMENT</b> (check all that apply)</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____</p> <p><input type="checkbox"/> Deposit Account Deposit Account Number: <b>07-1700</b> Deposit Account Name: <b>Goodwin Procter LLP</b></p> <p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <p><input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</p> <p><input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments</p>					
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<p><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b></p> <table border="1"> <thead> <tr> <th rowspan="2"><b>Application Type</b></th> <th colspan="2"><b>FILING FEES</b></th> <th colspan="2"><b>SEARCH FEES</b></th> <th colspan="2"><b>EXAMINATION FEES</b></th> <th rowspan="2"><b>Fees Paid (\$)</b></th> </tr> <tr> <th><b>Fee (\$)</b></th> <th><b>Small Entity</b></th> <th><b>Fee (\$)</b></th> <th><b>Small Entity</b></th> <th><b>Fee (\$)</b></th> <th><b>Small Entity</b></th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td></td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td></td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td></td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td></td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table>								<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		<b>Fees Paid (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0	
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<p><b>3. APPLICATION SIZE FEE</b></p> <p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</p> <table border="1"> <thead> <tr> <th><b>Total Sheets</b></th> <th><b>Extra Sheets</b></th> <th><b>Number of each additional 50 or fraction thereof</b></th> <th><b>Fee (\$)</b></th> <th><b>Fee Paid (\$)</b></th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td colspan="2">- 100 =</td> <td>/50 (round up to a whole number) x</td> <td> </td> <td> </td> </tr> </tbody> </table>								<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>						- 100 =		/50 (round up to a whole number) x																																									
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<p><b>4. OTHER FEE(S)</b></p> <p>Non-English Specification, \$130 fee (no small entity discount)</p> <table border="1"> <tr> <td>Other (e.g., late filing surcharge):</td> <td>Petition for One-Month Extension of Time</td> <td>60.00</td> </tr> <tr> <td></td> <td>Submission of 8<sup>th</sup> Supplemental IDS</td> <td>180.00</td> </tr> <tr> <td></td> <td>Request for Continued Examination</td> <td>395.00</td> </tr> </table>								Other (e.g., late filing surcharge):	Petition for One-Month Extension of Time	60.00		Submission of 8 <sup>th</sup> Supplemental IDS	180.00		Request for Continued Examination	395.00																																													
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<p><b>SUBMITTED BY</b></p> <table border="1"> <tr> <td>Signature</td> <td colspan="2"></td> <td>Registration No. (Attorney/Agent)</td> <td>56,401</td> <td>Telephone</td> <td>(617) 570-1057</td> </tr> <tr> <td>Name (Print/Type)</td> <td colspan="2">Joel E. Lehrer</td> <td>Date</td> <td colspan="3">February 28, 2007</td> </tr> </table>							Signature			Registration No. (Attorney/Agent)	56,401	Telephone	(617) 570-1057	Name (Print/Type)	Joel E. Lehrer		Date	February 28, 2007		
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